

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>NVN10ADA</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>03/01/2010</b>
NAME OF PROVIDER OR SUPPLIER  <b>BRISTLECONE FAMILY RESOURCES, SAGEWIND SI1</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>1725 S MCCARRAN BLVD</b> <b>RENO, NV 89502</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
D 000	<p>Initial Comment</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws.</p> <p>This Statement of Deficiencies was generated as a result of the Complaint Investigation conducted at your facility on 3/1/10. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The facility is licensed for thirty-eight residential program beds for the treatment of abuse of alcohol and drugs. The census at the time of the survey was thirty-one. Two resident files and facility policy and procedures were reviewed.</p> <p>Complaint #NV00024550 was substantiated. See Tag D103 and Tag D075</p>	D 000		
D 075 SS=D	<p>NAC 449.114(1) Employees</p> <p>1. A facility must have on duty, all hours of each day, members of the staff sufficient in number and qualifications to carry out policies, responsibilities and program continuity.</p> <p>This Regulation is not met as evidenced by: Based on record review on 3/1/10, facility staff allowed 1 of 4 clients in social model detoxification, to take a medication longer than it was prescribed for (Client #2 - Valium for four extra doses).</p> <p>Severity : 2 Scope : 1</p>	D 075		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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D 103	Continued From page 1	D 103		
D 103 SS=I	<p>NAC 449.1214 Social Model Detox Pro</p> <p>1. A facility that offers a social model detoxification program:</p> <p>(a) Must have a physician, nurse practitioner, registered nurse or physician assistant conduct a physical assessment and a review of the general medical and drug history of a client within 24 hours after the client is admitted to the facility to ensure that a social model detoxification program is appropriate for the client.</p> <p>(b) Must not provide detoxification services for clients who exhibit life-threatening symptoms of withdrawal from alcohol and drug abuse.</p> <p>(c) Must develop and implement policies and procedures that protect the safety and health of clients. The facility must have these policies and procedures reviewed annually by a licensed physician who is familiar with the symptoms of withdrawal from alcohol and drug abuse.</p> <p>(d) Must ensure that the observation of a client during his treatment in the social model detoxification program is reflected in the records of the client as deemed necessary by the policies and procedures of that facility.</p> <p>2. The staff of a facility that offers a social model detoxification program must complete at least 6 hours of additional education in the detoxification of alcohol and drug abusers, as approved by the program of ongoing quality improvement pursuant to NAC 449.1218, every 2 years. Such education must include instruction in:</p> <p>(a) Acute withdrawal symptoms from alcohol and drug abuse; and</p> <p>(b) First-aid procedures for clients with seizures.</p>	D 103		

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D 103	<p>Continued From page 2</p> <p>This Regulation is not met as evidenced by: Based on record review and interview on 3/1/10, the facility failed to meet subsection 1(c) of NAC449.1214 for 2 of 4 clients receiving social model detoxification services (Client #1 and Client #2).</p> <p>Findings include:</p> <p>Facility policy #03-D004 revealed that if a client's vitals are not within the listed parameters, a doctor, the emergency room at a local hospital, or urgent care must be contacted.</p> <p>Client #1 was admitted to the facility on 2/3/10 for alcohol detoxification. Client #1 had a history of high blood pressure and was on medications used to control it (Verapamil, HCTZ, and Atenolol).</p> <p>On 2/6/10 at 8 AM Client #1's blood pressure was 198/110. The acceptable range per policy #03-D004 for the systolic blood pressure (top number) was 90 to 180 and the acceptable range for the diastolic blood pressure (bottom number) was 50 to 120. His blood pressure was taken again at 9:20 AM was 201/116. The blood pressure was 196/122 at 9:55 AM.</p> <p>The facility did not contact a physician, ER or an urgent care, but at 9:20 AM, told the client to find someone willing to give him a ride to the hospital. At 11:30 AM, over two hours after the client's blood pressure was first recorded as out of range, staff called an ambulance and the client was transported to the local hospital's ER.</p> <p>Client #2 was admitted to the facility on 2/1/10 for drug detoxification.</p>	D 103		

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D 103	<p>Continued From page 3</p> <p>On 2/7/10 at 8 PM Client #2's pulse was 121. The upper limit for pulses was 120 per policy #03-D004. The facility did not contact a physician, ER or an urgent care. Her vital signs were taken again at 8:35 PM and her pulse was up to 148. The client was also nauseous and vomiting. Staff advised her to get herself a ride to the ER. No one came to transport the client so staff called an ambulance at 8:50 PM. The ambulance arrived 10 minutes later and took the client to the hospital; one hour after her pulse was first recorded as out of range.</p> <p>The facility failed to implement facility policies and procedures to protect the safety and health of clients undergoing social model detoxification services.</p> <p>Severity : 3    Scope : 3</p>	D 103			

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